

EL400 Revised: 11-5-15 **BARBARA K. CEGAVSKE** Secretary of State **Elections Division** 101 North Carson Street, Suite 3 Carson City, Nevada 89701-3714 Phone: (775) 684-5705

Fax: (775) 684-5718 Website: www.nvsos.gov

## State of Nevada **Committee for Political Action** (PAC)

**Registration Form** 

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NEVADA SECRETARY OF STATE 2016 APR 26 AFT 9 58

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X New Registration	PAC (Advocating	PAC (Advocating Passage or Defeat of a Ballot Question)			
Annual (Due on or before J	lanuary 15th of <u>each</u> ye	ear; NRS 294A.230(4)	(b))		
Amended Registration:	Change Officers Change Registered		stered Agent	Change Address	
creek an unit appry	Change Name Previous Name of PAC				
	Other:				
Name of Committee:				Telephone:	
Ramirez Group Federal PAC				702-530-5249	
Mailing Address:					
531 South 7th Street	L	as Vegas	NV	89101	
Street Name, Number	City		State	Zip Code	
PAC Active Email Address: andres@ramirezgroup.com					
REGISTERED AGENT: pursua	int to NRS 294A.240, e	each PAC must appoir	at and keep in the	State a registered	
agent, as provided in NRS 14.03	zo, who must be a hatt	irai person who reside			
Name of Registered Agent: Andres Ramirez				Telephone:	
			702-5	702-530-5249	
Physical Address:				3	
531 South 7th Street	L	is Vegas	NV	89101	
REGISTERED AGENT ACCEP' Committee for Political Action.	CH TANCE: I hereby acce	•	State gistered Agent for	Zip Code the above-named	
XMIN		04/25/2	016		
Signature of Registered Agent					



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OFFICERS: List the name, title, address and telephone number of each officer (attach additional pages if necessary). Officer Name and Title: Telephone: Andres Ramirez, Treasurer 702-530-5249 Mailing Address: 531 South 7th Street Las Vegas NV 10198 Street Name, Number City State Zip Code Officer Name and Title: Telephone: Mailing Address: Street Name, Number City State Zip Code Officer Name and Title: Telephone: Mailing Address: Street Name, Number City State Zip Code Officer Name and Title: Telephone: Mailing Address: Street Name, Number City State Zip Code AFFILIATIONS: If the PAC is affiliated with any other organizations, list the name, address and telephone number of each organization (please attach additional pages if necessary). Name of Organization: Telephone: Ramirez Group 702-530-5249 Mailing Address: 531 South 7th Street Las Vegas NV 89101 Street Name, Number City State Zip Code Name of Organization: Telephone: Mailing Address: Street Name, Number City State Zip Code Name of Organization: Telephone: Mailing Address: Street Name, Number City State Zip Code SUBMITTED BY: Printed Name: Date: Telephone: Andres Ramirez 04/25/2016 702-530-5249

Signature of Representative of Group

Revised: 11-5-15